

400 R STREET, SACRAMENTO, CALIFORNIA 95814-6200



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Task Force on Culturally and Linguistically
Competent Physicians and Dentists
Working Group on Cultural Competency Certification
October 2, 2001
11:00 a.m.– 12:00 p.m.

Task Force Working Group Members Present

Ron Joseph, Executive Director, Medical Board of California, Chair Anil Chawla, M.D., Clinicas del Camino Real Melissa Welch, M.D., MPH, Health Plan of San Mateo Doreena Wong, Legal Counsel, National Health Law Program

Staff Members Present

Kristy Wiese, Assistant Deputy Director, Department of Consumer Affairs Anita Scuri, Legal Counsel, Department of Consumer Affairs

1. Call to Order

The Meeting was called to order at 11:10 a.m. by Ron Joseph, Chair.

2. Overview of Legislative Requirements.

The Chair began the meeting by discussing requirements in AB 2394 that the Task Force look at the cultural competency certification and continuing education standards. The purpose and intent for the Working Group was to discuss the legislation requirement for assessing the need to achieve voluntary certification standards for cultural and linguistic competency.

3. Defining the Purpose:

The Cultural Competency Certification Working Group Members discussed voluntary certification versus mandated certification.

Dr. Welch advised the amount of work required to become a competent physician was overwhelming and based upon her experience as a student and a resident, she favored voluntary certification. Dr. Welch indicated that further discussion was necessary to deliberate integrating required certification or voluntary certification.

Ms. Wong agreed that the working group members would need to discuss further the concept of voluntary standards versus required standards.

Mr. Joseph stated that to assess the skill level required for certification would be complicated. He inquired if the working group should pursue the requirement to measure the level of skill, mandate a certain amount of hours, or require course work.

Dr. Welch advised there are many components for cultural competency. Morever, what was the most efficient way to integrate certification into existing programs to enable physicians to become certified? Dr. Welch questioned what the process would be to require ongoing certification

Ms. Wong suggested reviewing existing avenues to become certified in the area of cultural competency.

Dr. Welch concurred with Ms. Wong's observations that we explore existing avenues for an ongoing certification process before creating new programs.

Mr. Joseph stated that the Continuing Education Work Group discussed the concept of utilizing incentives to increase cultural and linguistic skills. He asked if the Cultural Competency Work Group wanted to consider providing incentive based approaches, in the area of reimbursement, for recognition to encourage physicians to voluntarily pursue competency certification.

Dr. Welch responded that monetary incentives are not always effective. She questioned whether or not there was a precedent in other areas where monetary incentives had been used.

Ms. Wong commented that if certification was required for continuing education then a possible solution would be to incorporate an incentive based approach to reduce training costs to encourage provider participation.

Dr. Welch stated the California Endowment provides training for all their designated participating grantees in the area of cultural competency.

4. Discussion of Expected Outcomes

Given the overlap of subject areas and the limited attendance, the Task Force discussed the possibility of merging the Cultural Competency Certification Work Group and the Continuing Education Workgroup. Mr. Joseph indicated he would draft a letter to members of both working groups with the proposed recommendation.

Mr. Joseph inquired if the certification process should include attaining a certificate acknowledging successful completion of the competency training.

Dr. Welch responded the focus should be on certification and then continuing education. She advised that her training facility provided a certificate that the required hours had been met for continuing education.

Mr. Joseph asked Dr. Welch if the certification process for Internal Medicine included questions related to cultural competency. Dr. Welch remarked that for the most part as a medical student, there was no cultural competency certification, but as a resident she was asked questions pertaining to cultural competency.

Ms. Wong commented that Dr. Welch's training pertained to a level of specialty for cultural and linguistic competency.

Mr. Joseph asked the working group members if there were any comments or suggestions that staff could research or provide in the area of cultural and linguistic competency certification.

Dr. Welch stated she could provide information regarding the National Corporate Institute of Training in Washington D.C. and the Seattle cross cultural program who provides training in the area of interpreting services as well as the curriculum she developed at her UC facility.

5. Future Agenda Topics

Mr. Joseph advised the next working group meeting would be scheduled on the same day as the next quarterly Task Force meeting in January 2003. Mr. Joseph inquired if there were any additional agenda topics for discussion for the next scheduled working group meeting.

Dr. Welch requested including the topic areas of the Medical Board's standardized testing.

Ms. Conner advised the National Center in Washington D.C. could provide extensive detailed information in the area of curriculum development.

Mr. Joseph stated he would recommend collapsing the Continuing Education and the Cultural Competency Certification Working Groups.

Dr. Welch asked for clarification regarding the purpose the Cultural Competency Working Group would like to achieve in relation to the language contained in the legislation.

Mr. Joseph stated the language is from the enabling statute, AB 2394. He clarified that the Working Group would provide recommendations to the Task Force. After which, the Task Force would propose recommendations to the legislature to be considered as part of their final report.

Ms. Wiese advised that the Cultural Competency Standards Workgroup, convened by DHS, has not had their first meeting.

6. Public Comment

None

7. Meeting Adjourned at 11:50 a.m.